



THE CITY OF SAN DIEGO

## Emergency Water Regulations SDMC 67.38 Variance Request

Control # \_\_\_\_\_

Date RECD. \_\_\_\_\_

### Section I: Customer Information

Name (Last, First MI): \_\_\_\_\_

Account #: \_\_\_\_\_

Service Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

### Section II: Property Information (For commercial landscaping read Attachment A)

1. Total number of occupants (does not apply to commercial variance requests): \_\_\_\_\_
2. Total irrigated landscape area: \_\_\_\_\_ acres.
3. Size of fountain (if present): \_\_\_\_\_
4. Total size of pool(s)/spa(s) (if present): \_\_\_\_\_ gallons.
5. Meter size(s) (Check bill to determine): \_\_\_\_\_
6. Reason for requested variance: *Reference specific Municipal Code from §67.3803-§67.3808 (Example: §67.3803, j.) and provide a written explanation. Attach additional pages if necessary.*

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7. Proposed alternative to Code that accommodates your needs while achieving water reduction. If none, explain. \_\_\_\_\_

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### Section III: Administrative

Processing Fee Check Number: \_\_\_\_\_ (One processing fee per site- largest meter size applies)

*Note: Fee is non-refundable. Make check payable to: City Treasurer. For residential customers, a fee waiver is available based upon income. See Attachment B.*

- |                           |   |                      |
|---------------------------|---|----------------------|
| • Meter between ¾" and 1" | - | \$25 processing fee  |
| • 1 ½" meter              | - | \$50 processing fee  |
| • ≥ 2"                    | - | \$100 processing fee |

*I certify under penalty of perjury that all the information provided is truthful and correct. I understand that this form is required to be submitted to the City of San Diego, and that all information provided is subject to verification by the City. The City may request additional information and/or inspection of the interior and exterior of the premises. Knowingly providing false or misleading information for the purpose of receiving a variance is subject to civil and criminal penalties, including, but not limited to, issuance of an Administrative Citation in an amount up to \$1000.*

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Send this form along with processing fee to: City of San Diego Public Utilities Dept., 525 B Street, Suite 300, San Diego, CA 92101, Attention: Variance. Variance requests will be processed within 3 weeks of receipt. Customers will be notified of determination by mail. For questions call (619) 533-4187/4136.

**Attachment A**  
**Commercial Landscape Irrigation Variance Form**

Provide requested information for applicable condition. Staple additional information if necessary.  
Conditions 1-3 are more commonly used requests.

**Condition 1:** Current allowed watering times/specific days are insufficient to meet customers' requirements (§67.3806, b, 1). *May be granted if the sum of run times per meter during peak season exceeds allowable hours or there are limitations to the watering window.*

Meter #: \_\_\_\_\_ Meter size: \_\_\_\_\_  
Number of valves associated with: \_\_\_\_\_ Sum of run times per day during peak season: \_\_\_\_\_  
Limitations (if applicable) to watering window: \_\_\_\_\_  
Current designated days of the week per address: \_\_\_\_\_  
Requested days of the week: \_\_\_\_\_ Reason for variance: \_\_\_\_\_  
\_\_\_\_\_

**Condition 2:** Watering days do not allow for plant establishment (§67.3806, b, 5, C).

Square foot measurement of area to receive plant establishment: \_\_\_\_\_  
Location of plant establishment on site (e.g., front yard, back yard): \_\_\_\_\_  
Anticipated planting date: \_\_\_\_\_ Length of plant establishment: \_\_\_\_\_

**Condition 3:** Maintenance of existing landscaping for fire protection (§67.3808, b, 1, B). *If the Fire Department finds a risk factor in watering only on the designated days of the week.*

Square foot measurement of area to receive additional watering days: \_\_\_\_\_  
Location of brush management on site (e.g., front yard, back yard): \_\_\_\_\_  
Requested watering schedule: \_\_\_\_\_

**Condition 4:** Other landscape variance requests. *Use back of page if more space is needed.*

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**Attachment B**  
**Residential Fee Waiver Guidelines and Procedures**

Please refer to these qualifications and procedures when requesting a variance fee waiver. Fill out the form below and attach it to the variance request form. Public Utilities Department staff will determine whether qualifications are met.

**Qualifications:**

1. Applicant must be a domestic customer of the City of San Diego Public Utilities Department.
2. Applicant must request variance for property that is individually metered.
3. Water bill must be in applicant's name.
4. Applicant must not be claimed as a dependent on another's tax return.

**Must provide proof of one of the following:**

1. A utility bill showing participation in any low income assistance program.
2. Tax return demonstrating gross income at or below Federal Poverty Guidelines.

2015 HHS Poverty Guidelines	
Persons in Family or Household	Income Level
1	\$11,770.00
2	\$15,930.00
3	\$20,090.00
4	\$24,250.00
5	\$28,410.00
6	\$32,570.00
7	\$36,730.00
8	\$40,890.00
For each additional person, add:	\$4,160.00
<b>Source:</b> Federal Register <a href="http://aspe.hhs.gov/poverty/15poverty.cfm">http://aspe.hhs.gov/poverty/15poverty.cfm</a>	

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Based upon the fee waiver guidelines listed above, I am qualified to apply for a fee waiver associated with my request for variance. I have attached as proof of qualification (circle one and include with variance request):

- 1) Utility bill showing participation in any low income assistance program
- 2) Tax return demonstrating gross income at or below Federal Poverty Guidelines

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_